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**FEE TRANSMITTAL  
for FY 2003**

Effective 07/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 1270**Complete if Known**

Application Number	08/310,844
Filing Date	May 12, 1999
First Named Inventor	David J. Erker
Examiner Name	Mary M. Schmidt
Art Unit	1835
Attorney Docket No.	IBIS0058-100 (IBIS-0171)

**METHOD OF PAYMENT (check all that apply)**
☐ Check ☐ Credit card ☐ Money Order ☒ Other ☐ None
☒ Deposit Account:Deposit  
Account  
Number

90-1276

Deposit  
Account  
Name

Cozen O'Connor, P.C.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account
**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code (\$)

1001 750 2001 870

1002 330 2002 165

1003 620 2003 200

1004 750 2004 375

1005 180 2005 80

Fee Description

Utility filing fee

Design filing fee

Plant filing fee

Reissue filing fee

Provisional filing fee

Fee Paid

**SUBTOTAL (1)****(\$0)****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	4	113	0	X	0	=	
Independent Claims	4	32	0	X	0	=	
Multiple Dependent						=	

Large Entity Small Entity

Fee Code (\$)

1202 18 2202 8

1201 64 2201 43

1203 260 2203 140

1204 64 2204 42

1205 18 2205 9

Fee Description

Claims in excess of 20

Independent claims in excess of 3

Multiple dependent claim, if not paid

\*\* Release independent claims over original patent

\*\* Release claims in excess of 20 and over original patent

**SUBTOTAL (2)****(\$0)**

\*or number previously paid, if smaller. For Releases, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)

1051 130 2051 85

1052 50 2052 25

1053 130 2053 130

1012 2,020 2012 2,020

1004 820 2004 820

1005 1,840 2005 1,840

1251 110 2251 55

1252 410 2252 208

1253 930 2253 468

1254 1,450 2254 726

1255 1,870 2255 935

1401 320 2401 160

1402 320 2402 160

1403 280 2403 140

1451 1,510 2451 1,810

1452 110 2452 55

1453 1,300 2453 600

1501 1,300 2501 650

1502 470 2502 235

1503 630 2503 315

1480 130 2480 130

1607 50 2607 50

1606 180 2606 180

8021 40 8021 40

1809 750 2809 375

1810 750 2810 375

1801 750 2801 375

1902 800 1802 800

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**Complete if applicable****SUBMITTED BY**

Name (Print/Type)

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Registration No. Attorney/Agent

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610-224 1700

Signature

Kenneth H. Tarbut

Date

September 23, 2003

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PTO/SB/21 (A-63)

Approved for use through 07/31/2008 OMB 0441-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/310,844
Filing Date	May 12, 1999
First Named Inventor	David J. Ecker
Art Unit	1835
Examiner Name	Mary M. Schmidt
Attorney Docket Number	IBIS0058-100/ IDIS-0171

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;">1. Request for Continuation Examination</div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Remarks</div> <div>Express Mail No.: EV 148802441 US Date of Deposit: September 23, 2003</div>		
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	Kenneth H. Tarbet 43,181	
Signature		
Date	September 23, 2003	

### CERTIFICATE OF MAILING

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Typed or printed name	
Signature	Date

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